

REQUEST FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

To Commissioner For Patents

Please enter the following submission and withdraw the finality of the proceeding office action or withdraw any pending appeal and reopen prosecution before the Examiner.

Applicant Number	09/725,415	C
Filing Date	November 29, 2000	
First Named Inventor	Rakesh Taori	
Group Art Unit	2654	
Examiner Name	Vijay b. Chawan	
Attorney Docket Number	N 17,762	

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 146.)

1. Submission required under 37 C.F.R. § 1.114		
a. X Previously submitted		
i. X Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on <u>June 09, 2005</u> Any unentered amendment(s) referred to above will be entered).		
ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on		
iii. Other		
b. Enclosed		
i. Preliminary Amendment		
ii. Affidavit(s)Declaration(s)		
iii. Information Disclosure Statement (IDS)		
iv. Other (may not be a brief)		
2. Miscellaneous		
a. Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of		
months. (May not exceed 3 months; Fee required per 37 C.F.R. § 1.117(i)		
b.		
b. Choi		
3. Fees		
a. X The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or credit any overpayments, to Deposit Account No. 14-1270		
SIGNATURE OF APPLICANT, ATTORENY, OR AGENT REQURIED		
Name (Print Type) Daniel J. Piotrowski Registration No. (Attorney/Agent) 42,079		
Name (Print Type)		
Signature Date Date		
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Mail Stop RCE, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office tel#: on the date below:		
Name (Print Type) Edna Chapa		
Signature Sharpe Date 8/2/05		

08/05/2005 SDENBOB1 00000096 141270 09725415

01 FC:1801

` 790.00 DA